

Dental Officer Career Development

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ALMOST certainly, even the most dedicated public servant employed in a large organization asks himself from time to time these questions: Am I progressing satisfactorily in my work? Am I developing professionally? Am I considered for new and challenging opportunities when they arise within my organization? What assurance do I have that my professional interests and aptitudes are recognized and considered when I am transferred to a new assignment?

On the other hand, administrators with responsibility for the successful attainment of the objectives of a public agency are likely to ask themselves these corresponding questions: Is this employee capable of handling this new assignment? How can I be assured that he is the best candidate for this position? How can I meet and overcome the attractions offered by employment in some other organization? How can I meet the future needs of my program for trained and competent personnel?

These significant questions are commonly raised by two kinds of people: those who do the work, and those responsible for getting them to do the work. The questions are concerned essentially with personnel retention, assignment, and development. Experience within the Public Health Service in dealing with these problems has led to the formulation of a systematic procedure designed to overcome some of the major difficulties associated with the

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optimal use of dental officers. This procedure is called career development and is applied to the 350 active duty dental officers employed in the various dental activities of the Public Health Service. The career development program as discussed in this review does not cover civil service personnel employed in the several dental activities of the Service, and detailed consideration is given here only to career development as it pertains to the dental public health activity of the Service.

Although the program in its present outlines has been in existence for only 2 years, its activities have been evolving gradually during a much longer period and are still undergoing change as circumstances dictate. In this regard, two important circumstances influencing the character of the program should be kept in mind. First, the Public Health Service does not have at this time an official, comprehensive Service-wide career development program for officers of all professional categories; each category (or program) has developed its own method. Second, although all the dental activities of the Service participate in the conduct of the career development program for dental officers from the standpoint of general procedure and coordination, each individual dental activity follows its own plan for training.

PHS Dental Officers

Before discussing the career development program itself, I should like to give focus to later remarks by mentioning some characteristics of the dental officer personnel of the Public Health Service which influence Service practices in recruitment and assignment.

The majority of dental officers are recruited while still in dental school, and they enter the

Service directly following graduation. They are appointed as interns in hospital training programs or to general duty assignments in the many clinical programs of the Service. A relatively small number of dental officers enter after 1 or more years in private practice, teaching, or research. Although turnover among the younger officers is high, chiefly because many of them join the Service to satisfy military obligations, they nevertheless constitute the largest percentage of total dental officers. Applicants for appointment and junior officers on active duty constitute the pool from which officers are drawn to fill vacancies in all clinical programs, since competence requirements are limited to basic dental training. Programs requiring officers with some experience in the Service fill their vacancies with officers who have had 2 or more years of active duty.

In addition to the officers who enter from school or shortly thereafter, a small number are appointed somewhat later in professional life. These are dentists who possess unusual qualifications derived from postgraduate training and experience in the clinical or public health specialties or in research.

Assignment of officers is governed by three considerations: (a) the needs of the Service, (b) the qualifications of the officer (aptitude, ability, experience, potential), and (c) the interests of the officer as to type of work and geographic location. In general, the effective date of initial assignment or reassignment is July 1, because the fiscal year appropriation is effective on that date.

The character of the dental programs carried out by the Service determines, of course, the qualifications required of personnel assigned to those programs. In the clinical activities the predominant need is for clinical skills of all degrees, with emphasis also on supervisory and administrative skills in training hospitals and other multiofficer installations. In dental public health and research activities, on the other hand, clinical skills are frequently subordinated to competence in highly specialized public health and research techniques.

Since experience alone cannot always assure the competence required for advanced technical, supervisory, and administrative positions, each dental program has developed its own system

for providing special experience and training to selected officers. During any given year a substantial number of dental officers are engaged in a wide variety of training assignments. These range from rotation of officers through other programs for better understanding of Service activities and opportunities and to encourage the development of special interests, to residencies and academic training in dental and public health schools. A noteworthy feature of the training of junior officers is the broadening experience provided by rotation through assignments which vary in character, geographic location, and degree of supervision received.

Although in one sense all officers on active duty are engaged continuously in some form of training, obviously there are limitations on the number who can be diverted from the work of the Service for extended periods of formal training in facilities outside the Service. Aside from program requirements, fund limitations impose an additional restriction on the number who can be provided with training at Service expense. Nevertheless, during the 1961 fiscal year, 15 dental officers engaged in long-term outside training and 9 officers were on extended training assignments within the Service.

The Career Development Program

Because of the urgent need for adequately trained dental officers to meet the rapidly expanding responsibilities and staff the programs of the Service, the major dental activities were assigned the task of designing a system which makes maximum use of the dental officers available. To accomplish this task, representatives of each activity met and formed the Dental Career Development Committee. Committee membership consists of the chief or assistant chief of each operating program because of the necessity for immediate decisions regarding vacant positions and availability of individuals being considered. There are five members, plus a nonvoting chairman who represents the Office of the Chief Dental Officer and provides staff assistance, and a nonvoting representative of the Division of Personnel. The committee meets when called; frequent sessions are held during the second and third quarters of the fiscal year in order to complete work well in

advance of personnel actions effective each July 1.

The committee's objectives are:

1. To develop and give direction to a recruitment program which gives emphasis to the variety of opportunities for dentists in the Service and is responsive to the long-term needs of the Service.

2. To press for a meaningful and continuing program of orientation for officers entering the Service.

3. To develop the basic and specialized clinical skills of Service dentists.

4. To recognize and develop the potential abilities of new and present PHS dentists commensurate with the needs of the Service.

5. To broaden the perspective of all commissioned officers by making it possible for them to become more familiar with all PHS dental activities.

6. As abilities and skills are developed, to utilize them most advantageously for the Service.

7. To provide a ready supply of well-qualified personnel to fill key positions that become available.

8. To encourage and to provide for training opportunities.

The committee procedure consists of three main actions: (a) an annual review of each dental officer's record with recommendation that he remain in his current assignment or be re-assigned, (b) a review of the needs of each operating program for dental officers for the coming fiscal year, and (c) a matching of available dental officers with program needs.

The annual review of each dental officer's file includes examination of his current status from the standpoint of progress and performance and demonstrated abilities in his present assignment, change in qualifications due to training or experience, significant comments made by supervisors on efficiency reports, and any preference expressed by the officer for a specific assignment or kind of training. From this evaluation of the officer's record, the committee, in order to improve the officer's performance and professional development, recommends that he either remain in his assignment for another year or be transferred to a more appropriate assignment. It is at this time that

specific kinds of experience and the length of the training period are considered for each officer.

About midyear, the Service dental programs develop their tentative staffing plans for the next fiscal year based on anticipated funds. By midyear it is possible to know the number of positions that can be supported and to estimate the number of vacancies that will occur because of new positions or from loss of personnel. Each program presents its needs to the committee, indicating the qualifications required for each vacant position.

In matching dental officers with positions, there are occasions when an officer could be placed in either of two programs; in these instances, the recommendation of the committee is determined by vote and majority decision. The principle of promotion from within applies also, and a program can reassign its own personnel. Similarly, officers already on duty in the Service are considered for assignment before newly appointed officers, and Regular Corps officers are given precedence in assignment over Reserve Corps officers.

All personnel actions affecting an officer produce interest and concern on his part, but this concern is accentuated by transfers to new geographic locations and to programs where responsibilities are increased or different skills are required. Frequently an officer experiences a feeling of insecurity when faced with reassignment to another program for which he possesses no special experience or competence. This is particularly true when the new assignment calls for skills which are supervisory or administrative rather than clinical.

An effort is made to anticipate and overcome possible concern about the unknown by providing officers with some understanding of all Service dental activities. General acquaintance with the organization, functions, and programs of the Service is provided through various orientation courses and by supplying publications descriptive of the Service dental activities. Dental officers in clinical assignments are encouraged to visit and become more familiar with public health and research programs and projects when opportunity affords.

A more specific opportunity to become better acquainted with other dental activities is pro-

vided when an officer is under consideration for assignment to a particular program. Frequently the officer is invited to make a special visit to learn more about the program and is interviewed by one or more program directors in order to stimulate and determine his degree of interest in the program and evaluate his qualifications and potential. While the program for which the officer is being considered may be described in detail, no offer of an assignment or other commitment can be made until the officer has been reviewed by the Career Development Committee and agreement reached (a) that he is eligible for reassignment, (b) that reassignment to the program desiring the officer is in accordance with the needs of the Service, the qualifications of the officer, and his interests, and (c) that the officer shall be so reassigned.

Division Program

To meet its particular needs, the Division of Dental Public Health and Resources has developed specialized training within the framework of the career development program for dental officers.

The interviews conducted by the division include a description of the division's special 3-year career development program for officers who are entering public health activities from a clinical background. In the first year, the officer is assigned to one of the Public Health Service's regional offices as a trainee member of the dental staff. The trainee then enters upon a carefully planned schedule of activities designed to acquaint him with public health activities in local and State health departments and with the program and operation of the Public Health Service regional office. He becomes familiar with the responsibilities of the regional office and its working relationships with other agencies, actively participates in the regional office program, and acquires a general understanding of dental public health. Special effort is made to have the trainee plan and carry out at least one dental health project. Twice during the year, the trainee is evaluated by his supervisor, and at the end of the year he writes an extensive report of his experience, including an evaluation of the training program and the supervision received. Before the end of the

year, the officer knows whether or not he would like to continue in dental public health, and a decision is made whether he will be recommended for continuation in the training program or for reassignment elsewhere in the Service.

During the second year, the officer is assigned to a school of public health of his choice for formal training. School officials report periodically on the academic progress and outstanding qualities of the officer, both favorable and unfavorable.

In the final year of the career development program, the officer is assigned to a State health department dental program, essentially in the status of a State employee, for experience as a full-time working member of the State health agency. Again, this experience is carefully planned to provide appropriate learning situations. From this assignment the trainee gains firsthand understanding and "know-how" by applying the theoretical principles of public health administration and practice at both the State and local level.

A dental officer does not begin this prolonged training, which involves four transfers within 3 years and a heavy financial investment by the Service, without first receiving a careful explanation of the program. Occasionally, a candidate prefers to remain in clinical dentistry, usually because he has a strong interest in some field of clinical practice. A married officer is asked to discuss the proposal with his family before agreeing to participate in the training program. Experience has shown that the normal aversion of an officer and his family to frequent change in geographic location becomes of minor concern when weighed against the very real advantages to be gained.

In practice, the division's career development program in dental public health does not always follow the ideal pattern presented here. Although every effort is made to adhere to the 3-year sequence of assignments, there are times when pressure to supply staff for rapidly expanding and new programs forces curtailment of training schedules. At various times, the year spent in the regional office or the year in the State health department is dropped or postponed, and some trainees have gone directly to public health school from clinical backgrounds.

Sometimes, the usual sequence is changed, and an officer is assigned to a regional office and then to a State health department before formal training. In the main, however, the accelerated version has been avoided whenever possible.

In one respect the division program has been inadequate, and that is in the relatively small number of dental officers who can be provided with training during a given year. However, over the past 15 years or more, 25 officers have been trained in dental public health; 15 are currently with the division. During fiscal year 1961, nine officers were at various stages in the division training program, and four of them completed training that year.

It might be expected that, because of the transition from clinical to public health practice, attrition would be high and that some officers either would not complete training or would want to return to clinical dentistry after training was completed. However, only four officers have been lost to the division for these reasons. Of these, three are now in clinical dental activities of the Service and only one has left the Service. This record indicates that the career development program in dental public health has been moderately successful in serving the needs of the division and in attaining its objectives.

Conclusions

The Service-wide dental career development program has effectively served its objectives in providing a review mechanism to meet the needs of the Service by periodic evaluation and assignment of dental officers to greatest advantage. The series of training assignments that officers receive provide a basis for evaluating their interests, aptitudes, and potential and for selection of officers for special training to fill immediate and long-term needs of programs. At the same time, officers can acquire advanced skills in special fields and so gain greater job satisfaction and improved opportunities for professional advancement. The officer, furthermore, has opportunities to gain a variety of experiences, enabling him to judge intelligently which type of duty interests him the most.

Due consideration by the Public Health Service Dental Career Development Committee of these elements of personnel development has brought reasonable assurance of a coordinated, systematic, and productive approach in developing trained dental officers to fill key positions as they occur and in meeting the staffing requirements of the growing dental programs of the Public Health Service. Higher officer morale and improvement in service to the public are the ultimate benefits from such an approach.

Epidemiology for Nurses

A refresher course for nurses in communicable disease control, with emphasis on epidemiologic and statistical principles and techniques, will be held at the Communicable Disease Center, Atlanta, Ga., February 5 through 23, 1962.

Epidemiologic principles, the role of the laboratory in epidemiology, and the application of practical statistical methods to the problems of field epidemiology are considered through the study of current major communicable diseases. Also included are the principles on which nursing care in communicable diseases is based.

Communicable disease nursing consultants, public health nursing supervisors, educational directors, qualified public health staff nurses, industrial nurses, instructors in schools of nursing, and other nurses having supervisory, teaching, or consultative functions are eligible for admission to the course.